								Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000												.70	1	
CLAIMS AS FILED - PART I								SMALL	. EN	ITITY		OTHER	THAN	
		527	(Column	1)	(Column 2)			TYPE [OR	SMALL ENTITY		
TC	TAL CLAIMS	YG						RAT	E	FEE		RATE	FEE	
FO	PR	Ì	NUMBER FILED		NUMBER EXTRA			BASIC	FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		· 28			X\$ 9=			OR	X\$18=	504	
IND	EPENDENT CL	AIMS	4 minus 3 =		<u> </u>			X40=			OR	X80=	00	
MU	ILTIPLE DEPEN	DENT CLAIM PI	RESENT				+135=				OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL			OR	TOTAL	1054	
CLAIMS AS AMENDED - PART II									1	<u> </u>	1	OTHER	THAN	
(Column 1) (Column 2) (Column 3)								SMAI	LL E	NTITY	OR	SMALL	ENTITY	
ENT A	90.00	CLAIMS REMAINING AFTER AMENDMENT	Signature of the state of the s	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATI	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=		X\$ 9	=		OR	X\$18=		
AME	Independent	•	Minus	***		=		X40=	=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									_		OR	+270=		
								TO1				TOTAL		
(Column 1) (Column 2) (Column 3)									EE	· · · · · · · · · · · · · · · · · · ·	Ŋ - · ·	ADDIT. FEE	<u></u>	
ENT B		CLAIMS REMAINING AFTER AMENDMENT	The second secon	HIGH NUM PREVI	IEST IBER	PRESENT EXTRA		RATI	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT B	Total	•	Minus	**		=		X\$ 9	=		OR	X\$18=		
	Independent		Minus	***		=		X40=	=		OR	X80=		
<u> </u>	THIST PHESE	NTATION OF MU	JUITPLE DEF	ENDEN	CLAIM		֧֧֓֞֞֞֞֜֞֞֜֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	+135	_		OR	+270=		
							į	TO1			OR	TOTAL		
(Column 1) (Column 2) (Column 3)									EEU		<u>"</u>	ADDIT. FEE		
AMENDMENT C	CLAIMS HIGH			IEST					ADDI-]		ADDI-		
	6 % 6 % % % % % % % % % % % % % % % % %	REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	=	TIONAL FEE		RATE	TIONAL FEE	
Ž	Total	*	Minus	**		=		X\$ 9	=		OR	X\$18=		
AME	Independent	*	Minus	***	T () 4 13 4	=		X40=	-		OR	X80=		
<u> </u>	I LIUSI LHESE	NTATION OF M	OLITE DE	ENDEN	LAIM			+135			OR	+270=		

^{*} If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.